FINAL CAMPAIGN CONTRIBUTION AND EXPENDITURE REPORT

For State and District Candidates Only

To be filed with:
Mark Martin, Secretary of State
State Capitol, Room 026
Little Rock, AR 72201
Phone (501) 682-5070
Fax (501) 682-3408

Year of Election 2016

 \square Check if this report is an amendment

For assistance in completing this form contact: Arkansas Ethics Commission Post Office Box 1917 Little Rock, AR 72203-1917 Phone (501) 324-9600 Toll Free (800) 422-7773

ALL INFORMATION IN THIS REPORT MUST BE COMPLETE THIS REPORT MUST BE FILED WITH THE SECRETARY OF STATE

Address City, State and Zip Frorest City, AR 12335 Office Sought Does the candidate have a campaign committee? Yes No If yes, complete the following: Name of Chairnerson/Treasurer: Tim Tucker Mailing Address Phone Number Way 0 2 2016 Arkansas Secretary of State File Stamp) FILE D Arkansas Secretary of State This report covers what period? (3 / 1 / 6) through (3 / 1 / 6) Applical party as defined in Ark. Code Ann § 7-1-10 or a political party caucus of the Arkansas General Assembly, the Senate, or the House of Representatives Assembly, the Senate, or the House of Representatives SUMMARY FOR REPORTING PERIOD Contributors to the candidate's campaign Contributors to the candidate's campaign Chies of the first class, cities of the second class, or incorporated towns SUMMARY FOR REPORTING PERIOD Contributors (and paint) and the cycle for that same office. SUMMARY FOR REPORTING PERIOD TOTAL 4. Balance of campaign funds at beginning of reporting period 5. Interest (if any) earmed on campaign account 6. Total Loans (enter total from line 12) 7. Total Monetary Contributions (enter total from line 12) 9. Carlyover Funds or Debt at close of election (use brackets to indicate dety) Notary Public Arkansas FOLASKI COUNTY Note: If ta bed, and the original must follow within ten (10) days.	1. Name of Candidate Masheul Wright			
City, State and Zip Forcest City, AR 12335 Office Sought Does the candidate have a campaign committee? Yes No If yes, complete the following: Name of Chairperson/Treasurer: Mailing Address	Address			
Does the candidate have a campaign committee? Yes \ No (Secretary of State File Stamp) flyes, complete the following: Name of Chairperson/Treasurer: FILED	City, State and Zip Forrest City, AR 72335	(870)	633-	8 <i>575</i>
Does the candidate have a campaign committee? Yes No If yes, complete the following: Name of Chairperson/Treasurer: Mailing Address	State Representative			
Name of Chairperson/Treasurer: Malling Address	Does the candidate have a campaign committee? XYes \(\square \) No	(Sec	retary of S	State File Stamp)
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6. Total Loans (enter total from line 12) 7. Total Monetary Contributions (enter total from line 18) 8. Total Expenditures (enter total from line 27) 9. Carryover Funds or Debt at close of election (use brackets to Indicate debt) 10. (V) NO ACTIVITY (check if you have not received contributions, loans, or made expenditures during this reporting period) 1 certify to the best of my knowledge and belief that the information discussed in this report is a complete, true, and accurate financial statement of my (the candidate's) campaign contributions and expenditures Signature of Candidate's Representative Swom to and subscription for the candidate of Candidate's Representative Notary Public Arkansas Notary Public Arkansas Pulaski County My Commission Expires: My Commission Expires:	Balance of campaign funds at beginning of reporting period	\$10,4	14.78	
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Swom to and subscript of MSON (Leading Public Arkansas NOTARY PUBLIC-ARKANSAS PULASKI COUNTY Signature of Candidate or Candidate's Representative No County, Arkansas, on this 2 day of My Commission Expires: My Commission Expires:				- +
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(Legis Notary Public-ARKANSAS My Commission Expires: My Commission Expires:	Signature of Candidate or Cand	lidate's Represent	tative	
(Legible Notary DUBLIC-ARKANSAS PULASKI COUNTY Notary PUBLIC-ARKANSAS My Commission Expires: 50005	Swom to and subscripped before rate a Notary Publicative and for MUSK. County, Arkansas,	on this day o	ma	4 10
PULASKI COUNTY	(Legible Notary Signature Notary Public-ARKANSAS My Commission Expires:	05/01/01	<u>ਕ</u> ਾਵ	
	PULASKI COUNTY	the original mus	et follow w	rithin ten (10) days.

11. LOAN INFORMATION

Please Type or Print Do not list loans previously reported

DATE	NAME AND ADDRESS OF LENDING INSTITUTION	GUARANTOR(S), IF ANY	AMOUNT OF LOAN
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	12 TOTAL LOANS DU	RING REPORTING PERIOD	NIA

IMPORTANT

The limits on campaign contributions do not apply to loans or contributions made by a candidate from his or her own personal funds to the campaign or to personal loans made by financial institutions to the candidate and applied to his or her campaign. Any loans made by a candidate to his or her campaign and any loans made by a financial institution to a candidate and applied to his or her campaign shall be reported in Section 11.

If a candidate desires to use or raise campaign funds to repay himself or herself for personal funds that he or she contributed to the campaign, then he or she would need to report those personal funds as a loan in Section 11.

If a candidate does not desire to use or raise campaign funds to repay himself or herself for personal funds that he or she contributed to the campaign, then those personal funds would not be reported in Section 11. Instead, they would be reported as a campaign contribution either in Section 15 or on line 17, depending upon the amount.

If a candidate has unpaid loans at the time of the primary, runoff or general election, the source, description and amount of each such loan should be itemized in Section 28. A candidate ending his or her campaign in debt is permitted to raise funds to retire the debt subject to the restrictions contained in Ark. Code Ann. § 7-6-219.

13. NONMONEY CONTRIBUTIONS

(Does not include volunteer services by individuals)

Date of Receipt	Full Name and Address of Contributor	Description of nonmoney item	Value of nonmoney item	Cumulative Total From This Contributor
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-	!			
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•	14. TOTAL N	IONMONEY CONTRIBUTIONS	NIA	

IMPORTANT

In addition to monetary contributions, candidates are required to report the receipt of any nonmonetary ("in-kind") contributions. A candidate receives an in-kind contribution whenever a contributor provides him with an item or service without charge or for a charge which is less than the fair market value of the item or service in question.

The value of an in-kind contribution is the difference between the fair market value and the amount charged. In-kind contributions are addressed in greater detail in Sections 205 and 206 of the Commission's Rules on Campaign Finance & Disclosure.

15. ITEMIZED MONETARY CONTRIBUTIONS OVER \$50

Please Type or Print

Date	Full Name and Mailing Address of Contributor	Place of Business/ Employer/Occupation	Amount of Contribution	Cumulative Total From This Contributor
			□Primary □ Run-Off □General □ Debt	Contributor
· -			□Primary □ Run-Off	
			□General □ Debt	
			□Primary □ Run-Off □General □ Debt	
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			□Primary □ Run-Off □General □ Debt	
			□Primary □ Run-Off □General □ Debt	
	Subtotal of Co	ontributions This Page		

ITEMIZED MONETARY CONTRIBUTIONS OVER \$50

Please Type or Print Date **Full Name and Mailing Address of Contributor** Place of Business/ Amount of **Cumulative Total** From This **Employer/Occupation** Contribution Contributor □Primary □ Run-Off ☐General ☐ Debt ☐Primary ☐ Run-Off □General □ Debt □Primary □ Run-Off □General □ Debt □Primary □ Run-Off ☐General ☐ Debt □Primary □ Run-Off □General □ Debt 16. TOTAL ITEMIZED MONETARY CONTRIBUTIONS OVER \$50 17. TOTAL NONITEMIZED MONETARY CONTRIBUTIONS

Ark. Code Ann. § 7-6-202 provides that a person who knowingly fails to comply with the provisions of subchapter 2 of chapter 6, Title 7 of the Arkansas Code shall upon conviction be guilty of a Class A misdemeanor.

18. TOTAL MONETARY CONTRIBUTIONS THIS REPORT

(includes lines 16 and 17)

19. CAMPAIGN EXPENDITURES BY CATEGORY

Please Type or Print

	CATEGORY		TOTAL AMOUNT	
Filing Fee				
Television Advertising				
Radio Advertising				
Newspaper Advertising				
Other Advertising			<u> </u>	
Office Supplies				
Rent				
Utilities				
Telephone		·	· · · · ·	
Postage Direct Mail			<u> </u>	
Travel Expenses				
Entertainment				
Fundraising	-			
Repayment of Loans				
Returned Contributions				
Consultant Fees				
Polls				
Paid Campaign Workers	· · · · · · · · · · · · · · · · · · ·			
Other (list)				
	· · · · · · · · · · · · · · · · · · ·			
			•	
	20. TOTAL CAN	IPAIGN EXPENDITURES		
			•	
(Include any perper	21. PAID CAMPAIG	IN WORKERS paign, does not have to be full-tim	a wadaad	
NAME OF WORKER	AMOUNT	NAME OF WORKER	AMOUN	iΤ
	PAID		PAID	

·				
		•		
	i	•		
	22. TOTAL AN	OUNT PAID CAMPAIGN V	VORKERS \$ N/A	

Ark. Code Ann. § 7-6-202 provides that a person who knowingly fails to comply with the provisions of subchapter 2 of chapter 6, Title 7 of the Arkansas Code shall upon conviction be guilty of a Class A misdemeanor.

REVISED 08/2015

23. ITEMIZED CAMPAIGN EXPENDITURES OVER \$100

Please Type or Print (Use copies of this page as needed)

Name and Address of Supplier/Payee	Description of Expenditure	Date of Expenditure	Amount of Expenditure
			
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24. TOTAL ITEMIZED EXPENDITURES			
25. TOTAL NONITEMIZED EXPENDITE			
26. TOTAL PAID CAMPAIGN WORKER 27. TOTAL EXPENDITURES THIS REF			
ZI. IVIAL EXPERDITURES INIS REP	ON I (IIICIUUSS IIIISS 24, 25 dNQ 2	LUJ	

NOTE: Expenditures Reflected on Lines 24, 25 and 26 Should Be Totaled by Category in Section 19

28. OUTSTANDING CAMPAIGN DEBTS

(INCLUDING UNPAID LOANS)

Please Type or Print Use additional pages if necessary

NAME AND ADDRESS OF CREDITOR	DESCRIPTION OF DEBT	CURRENT BALANCE
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a		
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		N/A
	29. TOTAL DEBT	/4///

28. OUTSTANDING CAMPAIGN DEBTS

(INCLUDING UNPAID LOANS)

Please Type or Print Use additional pages if necessary

NAME AND ADDRESS OF CREDITOR	DESCRIPTION OF DEBT	CURRENT BALANCE
•		
		<u>-</u>
****	74	
	29. TOTAL DEBT	